WORKER'S SETTLEMENT STATEMENT

Michigan Department of Labor & Economic Growth Workers' Compensation Agency P O Box 30016, Lansing, MI 48909

Plaintiff			Defendant				
		١	<i>I</i> .				
0 10 11 15							
a. Current Settlement Payment				\$			
b. 70% Benefits Paid (if any)				\$			
c. Total Redemption Settleme						\$	
ATTORNEY EXPENSES UNDER	R408.44(5)	Γ					
a			\$				
b			\$				
C			\$				
d			\$				
Pe. Total Expenses \$				\$			
TTORNEY FEE CALCULATION	UNDER R408.44(3)	(4)(7)					
Base for Fee Calculation (Total Redemption Minus T	otal Expenses)		\$				
3b	% of first \$25,000	=	\$				
3c	% above \$25,000	=	\$				
3d% X		=	\$				
3e. Total Attorney Fee				\$			
4. Redemption Fee				\$	100.00		
DIRECT PAYMENTS		_					
5a			\$				
5b.			\$				
5c.			\$				
5d. Total Direct Payments				\$			
6. 70% Benefits Paid				\$			
7. Total Expenses, Attorney	Fees, Redemption F	Fee. D	irect Payments		Benefits	\$	
8. Net Amount to Plaintiff (1	•	, -	, .		-	\$	
O. HELAINOUNL LO FIAINLIN (1	, mmuə 1 j					Ψ	
Lo	ertify that I have rea	d and	l approved of thi	s stateme	ent.		
Date Plaintiff						Attorney for Plaintiff	

WC-544 (4-04) Authority R408.44(3)